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APPLICATION NO.		FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/653,052		09/01/2000	Peter S. MacLeod	07844-356001	5508
21876	7590	10/14/2005		EXAMINER	
		OSON P.C.	NGUYEN, MADELEINE ANH VINH		
P.O. Box 1022 MINNEAPOLIS, MN 55440-1022				ART UNIT	PAPER NUMBER
	•			2626	
				DATE MAILED: 10/14/2005	

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No. Applicant(s)						
Interview Summary	09/653,052 MACLEOD, PETER S.						
interview Summary	Examiner	Art Unit					
	Madeleine AV Nguyen	2626					
All participants (applicant, applicant's representative, PTO personnel):							
(1) Madeleine AV Nguyen.	(3) Priya Viscuarat						
(2) Barbara ABCADit	(4)						
Date of Interview: 10/6/05							
Type: a)☐ Telephonic b)☐ Video Conference c)☐ Personal [copy given to: 1)☐ applicant 2)☒ applicant's representative]							
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e) No.						
Claim(s) discussed: 9,21,22							
Claim(s) discussed: 8,21,22 Identification of prior art discussed: Balonon-Kosen et al (AS later No. 6,307,961)							
Agreement with respect to the claims f) was reached. g) was not reached. h) N/A.							
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments:							
(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)							
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR FORM, WHICHEVER IS LATER, TO FILE A STATEMENT Summary of Record of Interview requirements on reverse s (2) We descenced the claimed prior aut	e last Office action has already THE MAILING DATE OF THI	been filed, APPLICANT IS S INTERVIEW SUMMARY					
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Examiner Note: You must sign this form unless it is an Attachment to a signed Office action:

Examiner's signature, if required